

STATE OF MAINE
MAINE REVENUE SERVICES
SALES, FUEL & SPECIAL TAX DIVISION
(M.R.S.A., Title 36, Chapter 704.)

APPLICATION for RETAIL TOBACCO PRODUCTS LICENSE

Fee – No Charge

Name and Location of Licensee:

For office use only

License No. _____

Date Issued _____

Application is hereby made for a Retail Tobacco Products License.

1. Business address, if different than indicated above.

1A. EIN Number _____

2. If single owner, give name of owner _____

2A. SS# _____

3. If partnership, give names and addresses of the several partners

Name _____ Address _____

Name _____ Address _____

4. If corporation, give names and addresses of principal officers or agents within Maine.

Name _____ Address _____

Name _____ Address _____

Date of Application _____ Tel.# _____

Signature of Applicant

THE LICENSE TO BE ISSUED WITH THIS APPLICATION WILL EXPIRE JUNE 30, 2003.

Forward this completed application to Maine Revenue Services, Sales, Fuel & Special Tax Division, State House Station #24, Augusta, Maine 04333.

For assistance, please call (207)624-9745